
OVERVIEW OF HEALTH AND PARTNERSHIP SCRUTINY COMMITTEE

1. Since the last meeting of the Council, the following are the main areas of work the Health and Partnership Scrutiny Committee has undertaken: -
 - (a) **Medium Term Financial Plan** – We have considered the two key proposals that fall within the Committee’s remit, the Fundamental Review of Social Capital, Equalities and Talking Together budgets and Reduction in Welfare Rights Service. The recommendations have been presented to the Special meeting of Efficiency and Resources Scrutiny Committee together with the other four Scrutiny Committees.
 - (b) **Winter Surge Plans and Flu** – NHS County Durham and Darlington have briefed us on its preparedness for the winter months and indicated that it has been working with all NHS and partner organisations to make appropriate preparations. There is an expectation that operationally all agencies will be prepared to enable a collaborative approach to any surge in activity. In addition all organisations have reviewed their plans to ensure they reflect any NHS structural changes. As well as the immediate operational preparedness NHS County Durham and Darlington is also required to report assurance for their flu vaccination campaign. We are pleased that in Darlington 70% of people over the age of 65 years old have received their flu vaccinations and that the Hospital Trust are actively encouraging their staff to be vaccinated and that 40% of front line staff have done so.
 - (c) **Darlington Strategic Needs Assessment 2010/2011** – At our December meeting we received copies of the Strategic Needs Assessment (SNA) which is a refresh of the 2010 report and includes a broader range of data. It was explained that the document brings together into one single point relevant information available on the needs of Darlington’s population, which is a combination of quantitative data with softer intelligence and feedback from the community and service users. The document is used as a powerful tool for defining priorities and shaping future services for Darlington and highlights areas where more is needed to be done to improve the health and wellbeing of Darlington’s communities’ and specific health and social care issues that require targeted actions. We look forward to a new SNA for 2012/2013 which will fall under the direction and responsibility of the Health and Well Being Board.
 - (d) **County Durham and Darlington NHS Foundation Trust Clinical Strategy and Vision** – The Medical Director of the Trust has provided us with an overview of the Clinical Strategy and Vision, reminding us that the Trust is now an integrated care provider working towards improving health for its patients. Work is underway on several care closer to home pathways including children, urgent care/accident and emergency, long term conditions, surgery, older people and adults and end of life care; while continuing to sustain core services in both Darlington Memorial Hospital (DMH) and University Hospital of North Durham (UHND). Although, there are a number of challenges and future developments on the horizon, including interdependence of

hospitals (quality finance and critical mass); focussing on complex and emergency care at DMH/UHND; trauma units at DMH and UHND; maternity and paediatric services review; changes in the wider health economy and strategic partnerships with Newcastle hospitals/other local Foundation Trusts. The Trust are creating specialist centres of excellence within its three Trust hospitals and services centred at DMH include upper limb surgery, Ears, Nose and Throat (ENT), bariatric surgery and upper gastro intestinal surgery. We were also reminded of the £40million site investment the Trust has spent on DMH. We have welcomed the presentation and agreed to undertake some further detailed investigations to the care closer to home pathways, to report back in due course.

- (e) **Community contribution to Darlington Partnership** – We have established a Task and Finish Review Group to assist with developing a proposal for how community contribution to Darlington Partnership can be achieved which would sit alongside mechanisms to deliver public, voluntary and private sector contributions. A draft proposal has been developed from earlier discussions with elected Members, including Member briefings earlier in the year and the work undertaken by the Portfolio Holder for Health and Partnerships. Members look forward to working with the Cabinet Member and Members from other Scrutiny Committee to progress this work and we will report back in due course.
- (f) **Darlington Health Profile 2010/11** – Following receipt of this year’s health profile for Darlington we have agreed to scrutinise one specific element at each of our meetings; this will enable us to gain an understanding of reasoning behind the data presented and enable us to consider how the health of our residents’ impacts on the services this Council provides. The work will be undertaken as a Task and Finish Review Group to enable Members to carry out detailed investigations themselves. The Group will focus on three specific areas; hip fractures in over 65’s; indicators in relation to smoking and indicators in relation to alcohol. We anticipate that this work will be undertaken with the assistance of NHS County Durham and Darlington Public Health Team and be completed in time to report to our final meeting of the municipal year.
- (g) **Tees Valley Health Scrutiny Joint Committee** – Councillor H. Scott and I attended a recent meeting of the Joint Committee and we considered the responses received from all of the Tees Valley Local Authorities in respect to key questions around Local Authority’s approach to the risk of seasonal flu and its possible impact on frontline social car staff. We also received information from NHS Tees regarding the development of Clinical Commissioning Groups across Tees and their Clear and Credible Plans.
- (h) **Work Programme 2011/2012** –We have given consideration to the Work Programme for this Committee for the Municipal Year 2011/12 and possible review topics and in doing so, we have taken into account the reduced resources available and ensured that, in recommending our work programme to Monitoring and Co-ordination Group, that any work we undertake will have demonstrable outcomes and contribute to the work of the Council and its strategic aims and objectives.

Councillor Wendy Newall
Chair of the Health and Partnership Scrutiny Committee